Fill in this information to identify your case:		17 08:55:08	Desc Main Document	Page 1 of 52
United States Bankruptcy Court for the:				
Eastern District of Texas				
Case number (If known):	Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13			☐ Check if this is an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called *ajoint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your	Joel First name	First name
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Catalano	
	your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	= .	<del></del>
	Include your married or maiden names.	First name	First name
		Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	xxx-xx- <u>6</u> <u>4</u> <u>3</u> <u>2</u>	xxx-xx
	Social Security number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx-xx	9xx - xx

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names	☐ I have not used any business names or EINs.  North Texas Stone Masons and Watergardens  Business name	☐ I have not used any business names or EINs.  Business name
	business as maines	Business name	Business name
		EIN	EIN
			EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1704 Falmouth Dr.  Number Street	Number Street
		Plano, TX 75025 City State ZIP Code	City State ZIP Code
		<u>Collin</u> County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:
	district to the for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	I have another reason. Explain. (See 28 U.S.C. § 1408)

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Par	t 2: Tell the Court About Yo	ur Bankruptcy Case
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13
8.	How you will pay the fee	<ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>
9.	Have you filed for bankruptcy within the last 8 years?	□No.  □No.
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓No.  Pess. Debtor Relationship to you  District When Case number, if known  Debtor Relationship to you  District When Case number, if known
11.	Do you rent your residence?	No. Go to line 12.  Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12.  Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

Deb					08 Desc N	lain Document Page 4 o	10wn) 1522
	First Name	Middle Name	Last Name	•			
Par	t 3: Report About Any Busin	iesses You C	wn as a Sole P	roprietor			
12.	Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	North Te Name of b  1704 Fall Number  Plano City  Check the  Single Stock Comr	e and location of bus exas Stone Masons rusiness, if any mouth Street  e appropriate box to the Care Business (as exas Asset Real Estate broker (as defined in	describe your business defined in 11 U.S.C. (as defined in 11 U.S.C. § 101(53A fined in 11 U.S.C. § 1	TX State sss: § 101(27A)) .C. § 101(51		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business</i>	deadlines. If you operations, cas 11 U.S.C. § 11	ou indicate that you a sh-flow statement, ar 16(1)(B).	are a small business d nd federal income tax	ebtor, you m	are a small business debtor so ust attach your most recent ba ny of these documents do not	lance sheet, statement of
	debtor, see 11 U.S.C. § 101(51D).	☐ No. I	am not filing under ( am filing under Cha Bankruptcy Code.	·	Γ a small bus	siness debtor according to the	definition in the
		☐ Yes. I		pter 11 and I am a sm	nall business	debtor according to the defini	tion in the Bankruptcy
Par	t 4: Report if You Own or Ha	ave Any Haz	ardous Property	y or Any Propert	y That Ne	eds Immediate Attent	ion
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		nat is the hazard?	s needed, why is it nee	eded?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that	Wł	nere is the property?				

needs urgent repairs?

Number

City

Street

Where is the property?

ZIP Code

State

First Name

Middle Name

Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ш	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

l certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Par	t 6: Answer These Questic	ns for	Reporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consume an individual primarily for a persona			1 U.S.C	C. § 101(8) as "incurred by		
nave?			No. Go to line 16b.						
			Yes. Go to line 17.	Yes. Go to line 17.					
		16b.	Are your debts primarily business business or investment or through the				ed to obtain money for a		
			No. Go to line 16c.	No. Go to line 16c.					
			Yes. Go to line 17.						
		16c.	State the type of debts you owe that	State the type of debts you owe that are not consumer debts or business debts.					
17.	Are you filing under Chapter 7?		No. I am not filing under Chapter	7. Go 1	to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<b>₫</b>	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No Yes						
			1-49		1,000-5,000		25,001-50,000		
18.	How many creditors do you		50-99		5,001-10,000		50,000-100,000		
	estimate that you owe?		100-199		10,001-25,000		More than 100,000		
			200-999						
			\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion		
19.	How much do you estimate your assets to be worth?		\$50,001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion		
	your assets to be worth:	$\mathbf{\Lambda}$	\$100,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion		
			\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion		
			\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion		
20.	How much do you estimate		\$50,001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion		
	your liabilities to be?	$   \sqrt{} $	\$100,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion		
			\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion		
Par	t 7: Sign Below								
	-	examine	ed this petition, and I declare under pe	enalty o	of periury that the information provide	ed is tru	e and correct.		
			n to file under Chapter 7, I am aware tand the relief available under each cl						
			epresents me and I did not pay or agreed at the notice required by 11 U.S.C. {			o help i	me fill out this document, I have		
I request re			in accordance with the chapter of title	e 11, L	Inited States Code, specified in this	petition	٦.		
			aking a false statement, concealing pes up to \$250,000, or imprisonment for						
	X		el Catalano	•					
	·	Joel Cat	talano, Debtor 1						
	Executed on <u>02/24/2017</u> MM/ DD/ YYYY								

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First Name

Middle Name

Last Name

#### For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Seth Crosland	Date 02/24/2017
Seth Crosland, Attorney	MM / DD / YYYY
Seth Crosland	
Printed name	
Brandy Austin Law Firm, PLLC	
Firm name	
2404 Roosevelt Drive	
Number Street	
Arlington	_TX76016
City	State ZIP Code
Contact phone	Email address seth@brandyaustinlaw.com
Contact phone	Email address seth@brandyaustinlaw.com  Texas

Fill in this informat	ion to identify your case	and this filing		c Main Document Page 8 c	of 52
Debtor 1	Joel		Catalano		
Debtor 2 (Spouse, if filing) United States Band Case number	First Name  First Name  kruptcy Court for the:	Middle Name			theck if this is an mended filing
Schedule in each category, so fits best. Be as con space is needed, an	nplete and accurate as ttach a separate sheet t	be items. Lis possible. If to this form. C	t an asset only once. If an asset fits in more than one of the comment of the com	ually responsible for supplying e and case number (if known).	correct information. If more
<ol> <li>Do you own of No. Go to Yes. When</li> <li>Legacy Street addescription</li> <li>1704 Fa</li> </ol>	or have any legal or equipart 2. e is the property?  Hills Block G, Lot 11 Idress, if available, or other	table interes	what is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured cl amount of any secured cl Creditors Who Have Cla Current value of the entire property? \$249,275.00	Current value of the portion you own? \$249,275.00  our ownership interest (such
<b>Collin</b> County			■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Check if this is comm	nunity property
you have atta			l of your entries from Part 1, including any entries	for pages	<b>→</b> \$249,275.00
Do you own, lease	e, or have legal or equita		in any vehicles, whether they are registered or not also report it on Schedule G: Executory Contracts a		

Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No ☑ Yes

Deb	tor 1	Joel Case 1	7-40369 Doc 1 I	Filed 02/24/17 08:55:08 Des	Case number (if kn	gwn)
200	.0, 1	First Name	Middle Name			
	3.1	Make: Model:	Chevrolet Silverado	Who has an interest in the property? Check one.  ✓ Debtor 1 only  Debtor 2 only	Do not deduct secured cla amount of any secured cla Creditors Who Have Clair	
		Year: Approximate mileage: Other information:	2008 228000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Current value of the entire property? \$6,000.00	Current value of the portion you own? \$6,000.00
4.	Ex			other recreational vehicles, other vehicles, and acce rcraft, fishing vessels, snowmobiles, motorcycle acce		
5.				all of your entries from Part 2, including any entrie here		\$6,000.00
Par	-t 3	: Describe Your Pers	sonal and House	ehold Items		
Do	you	u own or have any legal o	r equitable interest i	in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Ηου	usehold goods and furnis	shings			
	Exa	mples: Major appliances	s, furniture, linens, ch	ina, kitchenware		
	7	No Yes. Describe	Couch Loveseat Liv	ing Room Furniture Washer and Dryer Kitchen Applia	ances Bedroom Furniture	\$5,000.00
7.				stereo, and digital equipment; computers, printers, sc es, cameras, media players, games	canners; music collections;	
	7	No Yes. Describe	2 Televisions Comp	uter DVD Player Stereo		\$1,200.00
	Exa	stamp, coin, or ba		nts, or other artwork; books, pictures, or other art objeons; other collections, memorabilia, collectibles	ects;	
9.	Equ	ipment for sports and he	obbies			
		mples: Sports, photograp		ther hobby equipment; bicycles, pool tables, golf clubs	s, skis; canoes and kayaks;	
	<b>1</b>	No Yes. Describe				

Joel Case 17-40369 Doc 1 Filed 02/24/EqualEntered 02/24/17 08:55:08 Desc Main Document Page 10 of 52 Debtor 1 First Name Middle Name Last Name 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No ☐ Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Clothing \$400.00 Yes. Describe...... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Costume Jewelry Yes. Describe...... \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **√** No ☐ Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Describe...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$6,800.00 for Part 3. Write that number here..... Part 4: Describe Your Financial Assets Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Cash..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other

Institution name:

similar institutions. If you have multiple accounts with the same institution, list each.

☐ No ☑ Yes.....

Debto	or 1	Joel Ca	ase 17-40369	Doc 1	Filed 02/24	Case number (if known)  Desc Main Document Page 11 of 52	
		First Na		Middle Nan		Last Name	
			17.1. Che	cking accou	ınt:	Chase	\$300.00
			17.2. Che	cking accou	ınt:	Chase	\$55.10
			17.3. Savi	ings accoun	t:	Chase	\$100.00
			17.4. Savi	ings accoun	t:		
			17.5. Cert	tificates of d	eposit:		
			17.6. Othe	er financial a	account:		
			17.7. Othe	er financial a	account:		
			17.8. Othe	er financial a	account:		
			17.9. Othe	er financial a	account:		
18.	Bonds. mutu	ıal funds	, or publicly t	traded stoc	ks		
			-			e firms, money market accounts	
	<b>√</b> No						
	☐ Yes						
					corporated a	and unincorporated businesses, including an interest in	
	an LLC, part	nership,	and joint ve	nture			
	<b>✓</b> No						
	Yes. Give						
	them						
20.	Government	and cor	porate bonds	s and other	negotiable	and non-negotiable instruments	
						ecks, promissory notes, and money orders.	
	_	ole instrun	nents are thos	e you canno	ot transfer to	someone by signing or delivering them.	
	<b>✓</b> No	:C					
	Yes. Give information						
	them						
21.	Retirement of	or pensio	n accounts				
	Examples:	Interests	in IRA, ERISA	۹, Keogh, 4	01(k), 403(b)	, thrift savings accounts, or other pension or profit-sharing plans	
	<b>☑</b> No						
	Yes. List e separatel		ount				
22			l prepayment	re			
					e so that you i	may continue service or use from a company	
						tilities (electric, gas, water), telecommunications companies, or	
	others						
	<b>☑</b> No						
	☐ Yes						
23.	Annuities (A	contract f	for a periodic p	payment of i	money to you	ı, either for life or for a number of years)	
	<b>✓</b> No						

Debtor 1 Joel Case 17-40369 Doc 1 Filed 02/24/CatalEntered 02/24/17 08:55:08 Desc Main Document Page 12 01 52

Last Name

Middle Name

First Name

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **√** No ☐ Yes..... Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your **√** No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **✓** No ☐ Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **√** No ☐ Yes. Give specific information about them.... Tax refunds owed to you **√** No ☐ Yes. Give specific information about Federal: them, including whether you already filed the returns and the State: tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **√** No ☐ Yes. Give specific information....... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **✓** No ☐ Yes. Give specific information.......

Debtor 1 Joel Case 17-40369 Doc 1 Filed 02/24/17 Description Descr

	First Name	Middle Name	Last Name		
31.	Interests in insurance policie	es			
			savings account (HSA)	credit, homeowner's, or renter's insurance	
	<b>√</b> No				
		es. Name the insurance company of each policy and list its value  Interest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property use someone has died.  Ones. Give specific information			
	of each policy and lis	st its value			
32.	Any interest in property that	is due you from someon	e who has died		
	If you are the beneficiary of a l	iving trust, expect proceed	ds from a life insurance	policy, or are currently entitled to receive property	
	because someone has died.				
	No				7
	Yes. Give specific information	ation			
					_
33.		•		• •	
		syment disputes, insuranc	ce claims, or rights to si	ue	
	<ul><li>✓ No</li><li>☐ Yes. Describe each claim</li></ul>				]
	Tes. Describe each claim				
34.	Other contingent and unliqu	idated claims of every r	nature, including cour	nterclaims of the debtor and rights	
	to set off claims	,	<b>3</b>		
	<b>√</b> No				٦
	Yes. Describe each claim				
35.	Any financial assets you did r	not already list			
	<b>√</b> No				7
	Yes. Give specific information	ation			
26	Add the deller value of all of	very entries from Dort 4	in alceling any antrio	s for pages you have attached	
36.	for Part 4. Write that number	-			\$455.10
Dar	et 5: Describe Any Rusin	acc Palated Proper	rty Vou Own or H	ave an Interest In. List any real estate in P	art 1
	-	· · · · · · · · · · · · · · · · · · ·	-	-	art i.
37.	Do you own or have any lega  ✓ No. Go to Part 6.	al or equitable interest in	any business-related	property?	
	Yes. Go to line 38.				
38.	Accounts receivable or comm	nissions you already ear	ned		
	□ No □				7
	Yes. Describe				J
					<del>-</del>
39.	Office equipment, furnishing		domo naistese'	for machines were talenteened dealer at the state of	io devices
	Examples: Business-related	computers, software, mo	aerns, printers, copiers	s, fax machines, rugs, telephones, desks, chairs, electron	iic aevices
	□ No □ Vaa Baasiba				1
	☐ Yes. Describe				J

Debtor 1	Joel Case 17-40369	Doc 1 Filed 02/24	Catalantered 02/24/17 08:55:08	Desc Main Document	e number (if known) Page 14 of 52
	First Name	Middle Name	Last Name		

40.		oment, supplies you use in business, and tools of your trade		
	☐ No☐ Yes. Describe			
41.	Inventory			
	No Yes. Describe			
42.	Interests in partnerships	s or joint ventures		
	☐ No☐ Yes. Describe			
		Name of entity:	% of ownership:	
			%	
			%	
			//	
			%	
43.	☐ No	ists, or other compilations  lude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  pe		
44.	Any business-related pro  No Yes. Give specific information	perty you did not already list		
45.		Il of your entries from Part 5, including any entries for pages you have attached nber here		

Debtor 1 Joel Case 17-40369 Doc 1 Filed 02/24/EqualEntered 02/24/17 08:55:08 Desc Main Document Page (15/07/52)

First Name Middle Name Last Name Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes..... 48. Crops-either growing or harvested □ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ■ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list □ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **✓** No ☐ Yes. Give specific information..... \$0.00

Part 8: List the Totals of Each Part of this Form

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First Name Last Name Part 1: Total real estate, line 2..... \$249,275.00 Part 2: Total vehicles, line 5 \$6,000.00 57. Part 3: Total personal and household items, line 15 \$6,800.00 58. Part 4: Total financial assets, line 36 \$455.10 Part 5: Total business-related property, line 45 \$0.00 59. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61..... \$13,255.10 Copy personal property total -> \$13,255.10 62. \$262,530.10 Total of all property on Schedule A/B. Add line 55 + line 62.....

Fill	in this informat	ion to identify your cas	se:			: Main Document	Page 17 of 52
Deb	otor 1	Joel		Catalano			
	•	First Name	Middle Name	Last Name			
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name			
		kruptcy Court for the:		stern District of Tex	xas		
	se number nown)						☐ Check if this is an amended filing
Off	ficial Fo	rm 106C					
Sc	hedule	 e C: The Pr	operty Y	ou Claim	n as Exempt		04/16
orop	erty you listed	l on <i>Schedule A/B: Pi</i>	roperty (Official Fo	rm 106A/B) as you	r source, list the property th	nat you claim as exe	ng correct information. Using the empt. If more space is needed, fill out and ame and case number (if known).
exen exen clain	npt. Alternative nptions—such n an exemptio	ely, you may claim the h as those for health	e full fair market va aids, rights to rec ket value under a	nlue of the property eive certain benefi law that limits the e	being exempted up to the ts, and tax-exempt retiremexemption to a particular de	amount of any appl ent funds—may be	so is to state a specific dollar amount as icable statutory limit. Some unlimited in dollar amount. However, if you e value of the property is determined to
Pai	rt 1: Identi	fy the Property Y	∕ou Claim as Ex	kempt			
1.	You are cla	exemptions are you on a state and federal exemptions are your or a state and federal exemptions.	al nonbankruptcy ex	emptions. 11 U.S.C	r spouse is filing with you.		
2.	For any prope	erty you list on Sched	lule A/B that you c	laim as exempt, fill	in the information below.		
	Brief descript	ion of the property ar	nd line on Curre	ent value of the	Amount of the exemption	n you claim	Specific laws that allow exemption

Check only one box for each exemption.

portion you own
Copy the value from

Schedule A/B

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Schedule A/B that lists this property

☐ No☐ Yes

3. Are you claiming a homestead exemption of more than \$160,375?

Fill in this information	on to identify your case	e:		: Mair	n Document P	age 18 of 52		
Debtor 1	Joel		Catalano					
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bank	ruptcy Court for the:	East	ern District of Texas					
Case number _ (if known)						Check if the		
Official For	m 106D							
Schedule	D: Credite	ors Who	Have Claims S	Secured by	/ Proper	ty	12	2/15
			ople are filing together, both a tries, and attach it to this form					
,	have claims secured I	by your property?						
_			your other schedules. You have	re nothing else to repor	t on this form.			
☑Yes. Fill in all	of the information belo	ow.	•	,				
Part 1: List Al	I Secured Claims	3						
			ecured claim, list the creditor s	enarately for each	Column A	Column B	Column (	C
claim. If more t	han one creditor has a	a particular claim, lis	t the other creditors in Part 2.	•	Amount of clair		Unsecur	_
list the claims in	n alphabetical order ac	ccording to the credi	tor's name.		Do not deduct the		•	
					value of collatera	claim	il any	
2.1 Chase Mtg			be the property that secures t	he claim:	\$97,60	0.00 \$249	,275.00	\$0.00
Creditor's Name		: 0 ,	Hills Block G, Lot 11  Almouth Dr. Plano, TX 75025					
PO Box 24696 Number	Street			Chook all that apply				
		\ \ \_Cor	he date you file, the claim is:	эпеск ан татарру.				
Columbus, OF	1 13221		quidated					
City		ZIP Code Dis	•					
	e debt? Check one.		of lien. Check all that apply.					
Debtor 1 on	•		agreement you made (such as	mortango or				
Debtor 2 on	•		ured car loan)	mortgage of				
	d Debtor 2 only	☐ Stat	tutory lien (such as tax lien, me	chanic's lien)				
	of the debtors and and	othor	gment lien from a lawsuit					
☐ Check if thi community	is claim relates to a debt		er (including a right to offset)					
Date debt was	incurred	Last 4	digits of account number 9	<u>1 1 9 </u>				

May 28, 2003

Add the dollar value of your entries in Column A on this page. Write that number here:

\$97,600.00

Debtor 1 Joel Case 17-40369 Doc 1 Filed 02/24/12 Intered 02/24/17 08:55:08 Desc Main Document Page (19/01/52)

Last Name First Name Middle Name Column A Column B Column C Additional Page Amount of claim Value of Unsecured Part 1: After listing any entries on this page, number them beginning Do not deduct the collateral that portion supports this with 2.3, followed by 2.4, and so forth. value of collateral. If any claim 2.2 Describe the property that secures the claim: Creditor's Name As of the date you file, the claim is: Check all that apply. Number Street Contigent Unlquidated Disputed State ZIP Code Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or Debtor 2 only secured car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit At least one of the debtors and another ☐ Check if this claim relates to a Other (including a right to offset) community debt Last 4 digits of account number . Date debt was incurred

\$0.00 \$97,600.00

here:

Fill in this informat	ion to identify your cas	e:		: Main Document	t Page 20	of 52	
Debtor 1	<b>Joel</b> First Name	Middle Name	Catalano Last Name				
Debtor 2 (Spouse, if filing) United States Ban Case number	First Name kruptcy Court for the:	Middle Name Easte	Last Name ern District of Texas				
(if known)						Check if this is ar amended filing	1
Official Fo	rm 106E/F						
Schedule	e E/F: Cred	litors Who	o Have Unsecure	d Claims			12/15
any executory con Schedule G: Executors Who the Continuation F	tracts or unexpired lea utory Contracts and U Hold Claims Secured	ases that could resu Inexpired Leases (O I by Property. If mor the top of any addit	editors with PRIORITY claims and Pault in a claim. Also list executory conficial Form 106G). Do not include a re space is needed, copy the Part your name and calculations.	tracts on <i>Schedule A/B: P</i> oint or set on <i>Schedule A/B: Pointy</i> creditors with partially set out, number the set of the	<i>roperty</i> (Offi secured clai	cial Form 106A/I ms that are listed	B) and on d in <i>Schedul</i> e
No. Go to			nst you?	claim list the graditar congress	atoly for analy	a glaim For again	oloim listed
identify what t possible, list the Part 1. If more	ype of claim it is. If a cla he claims in alphabetic than one creditor hole	aim has both priority a cal order according to ds a particular claim,	and nonpriority amounts, list that claim and nonpriority amounts, list that claim the creditor's name. If you have more list the other creditors in Part 3. ctions for this form in the instruction bo	n here and show both priorite e than two priority unsecured	y and nonprid	ority amounts. As	much as
	,,	·			Total claim	Priority amount	Nonpriority amount
Priority Cred	ditor's Name		Last 4 digits of account number When was the debt incurred?	er			
Number	Street		<ul> <li>As of the date you file, the claim apply.</li> <li>Contingent</li> </ul>	ı is: Check all that			
	Sta	ate ZIP Code	<ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>				

Case 17-40369 Doc 1 Filed 02/24/17 Entered 02/24/17 08:55:08 Desc Main Document Debtor 1 Catalano First Name Middle Name Last Name List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **√** Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim \$367.00 4.1 **AWA Collections** Last 4 digits of account number 4379 Nonpriority Creditor's Name When was the debt incurred? 10/1/2011 AWA Collections 1045 W Katella Ave As of the date you file, the claim is: Check all that apply. Number Unliquidated Orange, CA 92867 Disputed ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ✓ Debtor 1 only Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Other. Specify ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No ☐ Yes \$35,559.96 4.2 Caprock Hardscape, Ltd. Last 4 digits of account number. Nonpriority Creditor's Name When was the debt incurred? Apr 28, 2016 792 E. Main St. As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Lewisville, TX 75057 Disputed State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ■ Student loans **☑** Debtor 1 only Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt Other. Specify Judgement Is the claim subject to offset? **☑** No ☐ Yes \$29,908.96 4.3 **DFW Stone Supply - Prosper** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Apr 20, 2016 **401 East University** As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Prosper, TX 75078 Disputed State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. □ Student loans ☑ Debtor 1 only Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts ✓ Other. Specify ☐ Check if this claim is for a community debt **Business Debt** 

✓ No □ Yes

Is the claim subject to offset?

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Debtor 1 Catalano Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Middle Name

First Name

TXU/Texas Energy Nonpriority Creditor's Name PO Box 650393 Number Street TXU/Bankruptcy Dallas, TX 75265-9627	Last 4 digits of account number 3985  When was the debt incurred? 11/1/2005  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$30
State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	<ul> <li>□ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>□ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Other. Specify</li> </ul>	

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Debtor 1 Joel Catalano
First Name Middle Name Last Name

6j. Total. Add lines 6f through 6i.

Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total claim 6a. Domestic support obligations 6a. \$0.00 **Total claims** from Part 1 6b. Taxes and certain other debts you owe the 6b. \$0.00 government 6c. Claims for death or personal injury while you 6c. \$0.00 were intoxicated 6d. Other. Add all other priority unsecured claims. 6d. \$0.00 Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim** 6f. Student loans \$0.00 6f. **Total claims** from Part 2 6g. Obligations arising out of a separation 6g. \$0.00 agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and \$0.00 6h. other similar debts 6i. Other. Add all other nonpriority unsecured claims. 6i. \$66,136.92 Write that amount here.

6j.

\$66,136.92

Fill in this information	on to identify your case	9:		Main Document	Page 24 of 52
Debtor 1	Joel		Catalano		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	Easte	ern District of Texas		
Case number					☐ Check if this is an
(if known)					amended filing

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with wh	om you hav	e the contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Fill in this information to identify your case:				: Main Document	Page 25 of 52	
Debtor 1	Joel		Catalano			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	East	ern District of Texas			
Case number					☐ Check if this is an	
(if known)					amended filing	
000 - 15	40011				· ·	

### Official Form 106H

# Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  ☑ No ☐ Yes	
2.	Within the last 8 years, have you lived in a community property state or territory? (Community p Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	roperty states and territories include Arizona, California, Idaho,
	✓ No. Go to line 3.	
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	
	No	
	Yes. In which community state or territory did you live? Fi	Il in the name and current address of that person.
	Name	_
	Number Street	_
	City State ZIP Code	_
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor of Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use <i>Schedule D, Schedule E/F, or Schedule C</i>	on Schedule D (Official Form 106D), Schedule E/F (Official
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.1	I	Schedule D, line
	Name	Schedule E/F, line
	Number Street	Schedule G, line
	City State ZIP Code	-
3.2		Schedule D, line
	Name	Schedule E/F, line
	Number Street	Schedule G, line
	City State ZIP Code	-
3.3		Schedule D, line
	Name	Schedule E/F, line
	Number Street	Schedule G, line
	City State ZIP Code	-

Fill						Main Dan		-0	
_	in this information	to identify your cas	e:			: Main Dod	cument Page 26 of 5	02	
De	btor 1 <b>J</b>	oel	Cata	alano					
	F	First Name	Middle Name Las	t Name					
	btor 2								
(Sp	ouse, if filing) F	First Name	Middle Name Las	t Name			Check if this is:		
Uni	ited States Bankrup	otcy Court for the:	Eastern Dist	rict of Texas			An amended	•	
	se number (nown)						A supplemen chapter 13 inc		tpetition e following date:
							MM / DD / Y	YYY	
Эf	ficial Form	1061							
 Sc	chedule I	· Your In	come						12/15
			le. If two married people are						
nddi Pa	rt 1: Describe	your name and ca	lude information about you ase number (if known). Ans						,
1.	Fill in your emplo information.	yment		Debtor 1			Debtor 2 or no	on-filing spo	use
	If you have more th	aan ana iah	Employment status	□ <sub>Employed</sub>			□ <sub>Employed</sub>		
	attach a separate information about	page with	Employment status	<b>☑</b> Not Employed			Not Employed		
	employers.		Occupation						
	Include part time,		·						
	self-employed wor	K.	Employer's name	-					
	Occupation may in or homemaker, if it		Employer's address	Number Street			Number Street		
				-					_
				City	State	Zip Code	City	State	Zip Code
			How long employed there	·	State —	Zip Code	City	State	Zip Code
Pa	ırt 2: Give Det	ails About Moi		·	State	Zip Code	City	State	Zip Code
Pa	Estimate monthly			9?	_				
Pa	Estimate monthly are separated.  If you or your non-	/ income as of the	nthly Income	bu have nothing to repor	t for any line	e, write \$0 in the	e space. Include your no	n-filing spous	e unless you
Pa	Estimate monthly are separated.	/ income as of the	nthly Income	bu have nothing to repor	t for any line	e, write \$0 in the	e space. Include your no	n-filing spous	e unless you
Pa	Estimate monthly are separated.  If you or your non-	/ income as of the	nthly Income	bu have nothing to repor	t for any line	e, write \$0 in the	e space. Include your no on on the lines below. If y	n-filing spous	e unless you
	Estimate monthly are separated.  If you or your non-attach a separate	r income as of the filing spouse have a sheet to this form.	nthly Income	ou have nothing to report the information for payroll	t for any line	e, write \$0 in the	e space. Include your no on on the lines below. If y For Debtor 2 or	n-filing spous	e unless you

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Last Name Middle Name

Copy line a here.					For Debtor 1		or Debtor 2 or	
Sa. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5b. \$0.00  5		Copy line 4 here→	4.		\$0.00		\$0.00	
5.0. Mandatory contributions for retirement plans 5.0. So. 0.00. \$0.00.	5.	List all payroll deductions:						
50. Mandatory contributions for retirement plans 50. \$0.00 50. Source 50. Columbary contributions for retirement plans 50. \$0.00 50. Source 50. Required repayments of retirement fund loans 50. \$0.00 50. Source 50. Domestic support obligations 50. \$0.00 50. Domestic support obligations 50. \$0.00 50. Source 50. Domestic support obligations 50. \$0.00 50. \$0.00 50. \$0.00 50. \$0.00 50. Domestic support obligations 50. \$0.00 50. \$0.00 50. \$0.00 50. Domestic support obligations 50. \$0.00		5a. Tax. Medicare, and Social Security deductions	5a		\$0.00		\$0.00	
5c. Valuntary contributions for retirement plane 5c. 830.00		•			\$0.00		\$0.00	
5d. Required repayments of retirement fund loans 5d. Insurance 5d. S0.00 S0.00 5d. Domestic support obligations 5d. Union dues 5d. S0.00 S0.00 5d. S0.00 S0.00 5d. S0.00 S0.00 5d. Other deductions. Specify: 5d. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5c + 5f + 5g + 5h. 6d. S0.00 S0.00 5d. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5c + 5f + 5g + 5h. 6d. S0.00 S0.00 5d. S		5c. Voluntary contributions for retirement plans			\$0.00		\$0.00	
St. Domestic support obligations  \$ 1.		5d. Required repayments of retirement fund loans			\$0.00		\$0.00	
5g. Union dues 5g. \$0.00 \$0.00 5h. Other deductions. Specify: 5h. Cher deductions. Specify: 5h. Cher deductions. Specify: 5h. \$0.00 \$0.00 50.00		5e. Insurance	5e.		\$0.00		\$0.00	
Sh. Other deductions. Specify:  Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.  Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.  Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.  Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.  Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.  But income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  But interest and dividends  But interest and		5f. Domestic support obligations	5f.		\$0.00		\$0.00	
So. Add the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  Add the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  Add the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  Add the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the payroll deductions. Add lines \$a + \$b + \$c + \$d + \$c + \$f + \$g + \$h}.  And the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  13. Do you expect an increase or decrease within the year after you file this form?		5g. Union dues	5g.		\$0.00		\$0.00	
6. Add the payroll deductions Add lines \$a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$		5h. Other deductions. Specify:	5h.	+	\$0.00	+	\$0.00	
<ul> <li>7. Calculate total monthly take-home pay. Subtract line 6 from line 4.</li> <li>7. \$0.00 \$0.00</li> <li>8. List all other income regularly recieved:</li> <li>8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</li> <li>8b. Interest and dividends</li> <li>8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</li> <li>8c. \$0.00 \$0.00</li> <li>8d. Unemployment compensation</li> <li>8e. \$0.00 \$0.00</li> <li>8e. Social Security</li> <li>8e. \$0.00 \$0.00</li> <li>8e. \$0.00 \$0.00</li> <li>8f. \$0.00 \$0.00</li> <li>8g. Vother government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.</li> <li>\$p. \$0.00 \$0.00</li> <li>\$p. \$0.00 \$0.00</li> <li>\$g. \$0.00 \$0.00</li> <li>\$0.00 \$0.00</li></ul>	6.				\$0.00		\$0.00	
8. List all other income regularly recieved:  8a. Net income from mental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. \$0.00 \$0.00  8d							<u> </u>	
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8c. \$0.00 \$0.00  8d. Unemployment compensation 8d. \$0.00 \$0.00  8e. Social Security 8e. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8f. \$0.00 \$0.00  8g. Pension or retirement income 8g. \$0.00 \$0.00  8h. Other monthly income. Specify: 8h. \$0.00 \$0.00  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$3.654.58 \$0.00  9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. \$3.654.58 \$0.00  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from a unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$3.654.58 Combined monthly income		regularly receive						
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Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Specify:  8f. \$0.00 \$0.00  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. + \$0.00 + \$0.00  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$3.654.58 \$0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. \$3.654.58 + \$0.00  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  Specify:  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. \$3.654.58 Combined monthly income.  The young expect an increase or decrease within the year after you file this form?		8e. Social Security	8e.		\$0.00		\$0.00	
that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$0.00 \$0.00  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. + \$0.00 + \$0.00  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  9. \$3.654.58  \$0.00  9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. \$3.654.58  Combined monthly income		8f. Other government assistance that you regularly receive						
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8h. Other monthly income. Specify:  8h. + \$0.00 + \$0.00  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  9. \$3.654.58 \$0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  12. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  13. Do you expect an increase or decrease within the year after you file this form?		Specify:	8f.		\$0.00		\$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$3,654.58 \$0.00 \$  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. \$3,654.58 + \$0.00 \$  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. \$3,654.58 Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?		8g. Pension or retirement income	8g.	-	\$0.00		\$0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  10. \$\\$3,654.58\$ + \$\\$0.00\$ = \$\\$3,654.58  11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:		8h. Other monthly income. Specify:	8h.	+	\$0.00	+	\$0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  10. \$\\$3,654.58\$ + \$\\$0.00\$ = \$\\$3,654.58  11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:	9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8a + 8b	9.		\$3.654.58		\$0.00	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  10. \$3,654.58 + \$0.00 = \$3,654.58  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:			0.			_		
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friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:	11.	State all other regular contributions to the expenses that you list in Schedule .	J.					
Specify:			depende	ents, you	r roommates, an	d othe	er	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. \$3,654.58  Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?  ✓ No.		Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay e	expenses listed in	Sche	edule J.	
amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?		Specify:				_	11. <b>-</b>	\$0.00
monthly income  13. Do you expect an increase or decrease within the year after you file this form?  ✓ No.	12.					ne. Wr		\$3,654.58
monthly income  13. Do you expect an increase or decrease within the year after you file this form?  ✓ No.								Combined
<b>☑</b> No.								monthly income
	13.							

Fill in this	information to identify your case:		: Main [	Document Pa	ge 28 of 52
Debtor 1	Joel	Catalano			
DODIO! !		Middle Name Last Name	Che	ck if this is:	
Debtor 2			<b>_</b> A	n amended filing	
(Spouse, i	f filing) First Name	Middle Name Last Name			wing postpetition chapter 13 expenses
United Sta	ates Bankruptcy Court for the:	Eastern District of Texas	<del>'</del>	s of the following	date:
Case num	nber			M / DD / YYYY	
(if known)					
Officia	al Form 106J				
	dule J: Your Ex	nenses			40/45
		If two married people are filing togetl	har both are equally responsible	for supplying co	12/15
		On the top of any additional pages, v			
Part 1:	Describe Your Household				
	s a joint case?				
_	o. Go to line 2.				
_	s. <b>Does Debtor 2 live in a separ</b> a	ate household?			
	□No				
	Yes. Debtor 2 must file Of	ficial Form 106J-2, Expenses for Sepa	arate Household of Debtor 2.		
2. <b>Do yo</b>	ou have dependents?	□No			
Do no Debto	ot list Debtor 1 and	$ \mathbf{V} $ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Depender age	nt's Does dependent live with you?
	each dependent o not state the dependents' names.			ugo	$\square_{No.}$
	·				<b>✓</b> Yes.
					── □No □Yes
					— □No □Yes
					☐No
					── ☐Yes ☐No
					Yes
	our expenses include expenses	✓No			
	ople other than yourself and dependents?	☐Yes			
Part 2:	Estimate Your Ongoing N	Monthly Expenses			
		uptcy filing date unless you are using nental Schedule J, check the box at the second state.			
			•	applicable date.	
		government assistance if you know Schedule I: Your Income (Official Fol			Your expenses
4. The re	ental or home ownership expens	ses for your residence. Include first mo	ortgage payments and any rent for		<b>A4 000 00</b>
groun	d or lot.			4.	\$1,600.00
If not	included in line 4:				
4a. Re	eal estate taxes			4a.	\$0.00
4b. Pr	roperty, homeowner's, or renter's i	nsurance		4b.	\$0.00
	ome maintenance, repair, and upke			4c.	\$0.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

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Last Name Middle Name

	You	ur expenses
6. Additional mortgage payments for your residence, such as home equity loans	5	
6. Utilities:		
6a. Electricity, heat, natural gas	6a	\$300.00
6b. Water, sewer, garbage collection	6b	\$100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$250.00
6d. Other. Specify:	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$400.00
3. Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$40.00
Personal care products and services	10.	\$60.00
Medical and dental expenses	11.	\$120.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$500.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
4. Charitable contributions and religious donations	14.	\$0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b.	\$0.00
15c. Vehicle insurance	15c	\$100.00
15d. Other insurance. Specify:	15d.	\$0.00
<ol> <li>Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.</li> <li>Specify:</li> </ol>	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:	17d	
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18.	\$0.00
9. Other payments you make to support others who do not live with you.  Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Joel Case 17-40369 Doc 1 Filed 02/24/Fatal Entered 02/24/17 08:55:08 Desc Main Document Page (if known) Debtor 1 First Name Middle Name Last Name 21. Other. Specify: 21. \$0.00 22. Calculate your monthly expenses. 22a. 22a. Add lines 4 through 21. \$3,570.00 22b. \$0.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$3,570.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 23. Calculate your monthly net income. 23a. \$3,654.58 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. \$3,570.00 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. \$84.58 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

✓ No. ☐ Yes.

Explain here:

Fill in this informati	on to identify your cas	: Main Document	Page 31 of 52			
Debtor 1 <b>Joel Catalano</b>						
-	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Texas						
Case number (if known)						Check if this is an amended filing
Official Fac	106Cum					arriorided lilling

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$249,275.00 \$13,255.10 \$262,530.10
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$97,600.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$66,136.92
Your total liabilities  Part 3: Summarize Your Income and Expenses	\$163,736.92
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$3,654.58
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$3,570.00

Debtor 1

Joel Catalano

First Name Middle Name Last Name

Case 17-40309 Doc 1 Filed 02/24/17 08:33:08 Desc Main Document Case number (17-k/hown)

Case number (17-k/hown)

Part 4: Answer These Questions for Administrative and Statistical Records						
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes						
<ul> <li>What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul>						
8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$609.10						
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim					
From Part 4 on Schedule E/F, copy the following:						
9a. Domestic support obligations (Copy line 6a.)	\$0.00					
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00					
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00					
9d. Student loans. (Copy line 6f.)	\$0.00					
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00					
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00					
9g. <b>Total</b> . Add lines 9a through 9f.	\$0.00					

Fill in this informati	on to identify your cas	: Main Document	Page 33 of 52			
Debtor 1	Joel	MC I II AI	Catalano			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Easte	ern District of Texas			
Case number				_		☐ Check if this is an
(if known)						amended filing

## Official Form 106Dec

# Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
☑No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the	summary and schedules filed with this declaraion and that they are true and correct.
X /s/ Joel Catalano	<b>v</b>
Joel Catalano, Debtor 1	<del></del>
Date 02/24/2017	Date
MM/ DD/ YYYY	MM/ DD/ YYYY

Fill in	this informati	on to identify your cas	e:		: Main Document	Page 34 of 5	52
Debto	or 1	Joel		Catalano			
	-	First Name	Middle Name	Last Name			
Debto							
	ise, if filing)	First Name	Middle Name	Last Name			
Unite	d States Bank	kruptcy Court for the:	East	ern District of Texas			
Case (if knd	number _						ck if this is an nded filing
Offi	cial For	m 107					
Sta	itemer	nt of Finar	cial Affai	irs for Indivi	duals Filing for Ba	ankrupto	Cy 04/16
neede Part			·	any additional pages, wri	te your name and case number (if kno ved Before	wn). Answer eve	ery question.
1. W	hat is your c	urrent marital status?	•				
	Married						
V	Not married						
	ring the last	3 years, have you live	d anywhere other t	han where you live now?			
	-	of the places you lived	in the last 3 years. D	o not include where you li	ve now.		
	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					☐ Same as Debtor 1		☐ Same as Debtor 1

From\_

То

To

include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

State ZIP Code

State ZIP Code

☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Street

Number

City

City

**√** No

Number Street

☐ Same as Debtor 1

Number Street

City

City

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories

То

From \_\_

То

☐ Same as Debtor 1

State ZIP Code

State ZIP Code

Doc 1

or 1	Joel Case 17-4	Middle Name	e Last Na	me		
	FIISTINAIIIE	wildule Name	E Last Na	une		
nsider's Nam	9					
Number St	reet					
City	State	ZIP Code				
Insider's Nam	e					
Number St	reet					
City	State	ZIP Code				
			Dates of	Total amount paid	Amount you still owe	Reason for this payment
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
				Total amount paid	Amount you still owe	
	e e			Total amount paid	Amount you still owe	
Insider's Nam	Э			Total amount paid	Amount you still owe	
	e reet			Total amount paid	Amount you still owe	
				Total amount paid	Amount you still owe	
				Total amount paid	Amount you still owe	
Number St		ZIP Code		Total amount paid	Amount you still owe	
Number St	reet	ZIP Code		Total amount paid	Amount you still owe	
Number St	reet	ZIP Code		Total amount paid	Amount you still owe	
Number St	reet	ZIP Code		Total amount paid	Amount you still owe	
Number St	reet	ZIP Code		Total amount paid	Amount you still owe	
Number St  City  Insider's Name	reet	ZIP Code		Total amount paid	Amount you still owe	
Number St  City  Insider's Name	reet State	ZIP Code		Total amount paid	Amount you still owe	
Number St  City  Insider's Name	reet State	ZIP Code		Total amount paid	Amount you still owe	
Number St  City  Insider's Name	reet State	ZIP Code		Total amount paid	Amount you still owe	
Number St  City  Insider's Name	State State			Total amount paid	Amount you still owe	
Number St  City  Insider's Name  Number St  City	State State State	ZIP Code	payment		Amount you still owe	
City Insider's Name Number St	State State State	ZIP Code			Amount you still owe	
Number St  City  Insider's Name Number St  City  City	State State State State	ZIP Code ns, Repossess	ions, and Forec	closures		Include creditor's name
Number St  City  Insider's Name Number St  City  City  T 4: Identi	state State State State before you filed for	ZIP Code ns, Repossess or bankruptcy, wer	ions, and Forec	closures y lawsuit, court action,	or administrative proce	Include creditor's name
Number St  City  Insider's Name Number St  City  City  T 4: Identi	state State State State before you filed for	ZIP Code ns, Repossess or bankruptcy, wer	ions, and Forec	closures y lawsuit, court action,	or administrative proce	Include creditor's name
Number St  City  Insider's Name Number St  City  Tt 4: Identi  Within 1 year ist all such malisputes.	state State State State before you filed for	ZIP Code ns, Repossess or bankruptcy, wer	ions, and Forec	closures y lawsuit, court action,	or administrative proce	Include creditor's name
Number St  City  Insider's Name Number St  City  City  Within 1 year	state  State  State  Fy Legal Action  before you filed foatters, including pe	ZIP Code ns, Repossess or bankruptcy, wer	ions, and Forec	closures y lawsuit, court action,	or administrative proce	Include creditor's name

Joel Case 17-40369 Doc 1 Filed 02/24/Entered 02/24/17 08:55:08 Desc Main Document Page 38 of 52 Debtor 1 Middle Name Last Name First Name Nature of the case Status of the case Court or agency Suit on Debt Case title Caprock Hardscape, Ltd. v. Denton County Court at Law No. 2 Pending Court Name Catalano, Joel Christopher d/b/a North On appeal Fexes neurope MSSV-2015-00768 **✓** Concluded Number Street Watergardens City ZIP Code State Pending Case title \_ On appeal Court Name □ Concluded Number Case number \_ City ZIP Code State 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property State of Texas 1/14/2008 \$21,214.00 Creditor's Name Street Explain what happened Number ☐ Property was repossessed. Property was foreclosed. Property was garnished. City ZIP Code State Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. City State ZIP Code

make a payment because you owed a debt?

Yes. Fill in the details.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to

r 1	First Name	Middle Name	ed 02/24/25atalEntered 02/24/17 08:55:08 Desc Ma		
	First Name	Middle Name	Last Name		
			Describe the action the creditor took	Date action was taken	Amount
Creditor's	- Name		_	12.00	
Number	Street		-		
City	Sta	te ZIP Code	_ Last 4 digits of account number: XXXX		
	ear before you filed for another official		any of your property in the possession of an assign	nee for the benefit of credito	rs, a court-appointed re
<b>1</b> No	i, or another official	•			
Yes					
5: List	Certain Gifts ar	nd Contribution	s		
thin 2 yea	rs before you filed f	or bankruptcy, did	you give any gifts with a total value of more than \$60	00 per person?	
No					
Yes. Fill ir	n the details for each	gift.			
	n a total value of mo	re than \$600 per	Describe the gifts	Dates you gave the gifts	Value
person				the girts	
Porson to V	Whom You Gave the G				
Person to v	whom You Gave the G	)III			
Number	Street				
City	St	ate ZIP Code			
Person's re	elationship to you				
Gifts with person	n a total value of mo	re than \$600 per	Describe the gifts	Dates you gave the gifts	Value
Person to \	Whom You Gave the G				
	Street				
Number	0001				
Number					
Number	St	ate ZIP Code			
City					
City	St.				
City Person's re	elationship to you		you give any gifts or contributions with a total value	e of more than \$600 to any o	harity?

irst Name	Middle Name

First Name Wildt			
Gifts or contributions to charities the total more than \$600	at Describe what you contributed	Date you contributed	Value
Charity's Name			
Chang s Name			
	_		
Number Street			
City State ZIP Code			
6: List Certain Losses			
No Yes. Fill in the details.			
Describe the property you lost and	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
how the loss occurred	Include the amount that insurance has paid. List pending	Date of your 1000	value of property lost
	insurance claims on line 33 of Schedule A/B: Property.		
			-
_			
7: List Certain Payments or Ti	ransfers		
ankruptcy or preparing a bankruptcy p	ptcy, did you or anyone else acting on your behalf pay or trar etition? oreparers, or credit counseling agencies for services required in		e you consulted about se
No			
Yes. Fill in the details.			
		<b>.</b>	
Crosland, Seth	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	Attorney's Fee		
2404 Roosevelt Drive	,	January 10, 2017	\$2,000.00
Number Street			
Arlington, TX 76016			
City State ZIP Code			

Person Who Made the Payment, if Not You

Number

City

Street

Person's relationship to you

State

ZIP Code

City State ZIP Code  Person's relationship to you	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pensi	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	State ZIP Code o's relationship to you  O years before you filed for bankrued asset-protection devices.)  Fill in the details.  of trust  st Certain Financial Accountyear before you filed for bankrupted?	City Person's reten called a No Yes. Fill in
City State ZIP Code  Person's relationship to you	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension tor  Date account was closed, sold, moved, or before closing	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	State ZIP Code o's relationship to you  O years before you filed for bankrued asset-protection devices.)  Fill in the details.  of trust  st Certain Financial Accountyear before you filed for bankrupted?	City Person's reithin 10 ye en called a No Yes. Fill in
City State ZIP Code  Person's relationship to you	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension tor  Date account was closed, sold, moved, or before closing	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	State ZIP Code  I's relationship to you  O years before you filed for bankru ed asset-protection devices.)  Fill in the details.  of trust  st Certain Financial Account year before you filed for bankrupt ed?	City Person's re ithin 10 ye en called a No Yes. Fill in
Person's relationship to you	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension tor  Date account was closed, sold, moved, or before closing	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	o's relationship to you	Person's resident 10 year called a No Yes. Fill in
Person's relationship to you	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension tor  Date account was closed, sold, moved, or before closing	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	o's relationship to you	Person's rethin 10 ye en called a No
thin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of an called asset-protection devices.)  No  Yes. Fill in the details.  Description and value of the property transferred  List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units thin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you reserved?  Ithin 1 year before you filed for bankruptcy, were any financial accounts; certificates of deposit; shares in banks, credited checking, savings, money market, or other financial institutions.  No  Yes. Fill in the details.  Last 4 digits of account number  Type of account or instrument  Type of account or instrument  Checking  Savings  Money market  Brokerage  Other  Street  Checking  Savings  Savings  Savings  Savings  Checking  Savings  Savings  Ghorey market  Brokerage  Other  Other  Other  Checking  Savings  Checking  Savings  Checking  Savings  Other	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension tor  Date account was closed, sold, moved, or before closing	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	O years before you filed for bankrued asset-protection devices.)  Fill in the details.  of trust  st Certain Financial Account year before you filed for bankrupt ed?	thin 10 ye en called a No Yes. Fill in
Description and value of the property transferred    Description and value of the property transferred	Date transfer wa made  prage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension tor  Date account was closed, sold, moved, or before closing	rty transferred  Boxes, and Storage L  truments held in your name	Description and value of the propernts, Instruments, Safe Depositive, were any financial accounts or instruments, or other financial accounts; certificate	ed asset-protection devices.)  Fill in the details.  of trust  st Certain Financial Account year before you filed for bankrupt ed?	en called a
Description and value of the property transferred	made  brage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension  out or  Date account was closed, sold, moved, or before closing	Boxes, and Storage L	nts, Instruments, Safe Deposit tcy, were any financial accounts or ins , or other financial accounts; certificat	of trustst Certain Financial Accour year before you filed for bankrupt	Name of tr
List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  thin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your sterred?  Itude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit dos, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Last 4 digits of account number  Type of account or instrument  Type of account or instrument  Checking  Savings  Money market  Brokerage  Other  Street  XXXX-  Checking  Savings  Money market  Brokerage  Other  Street  Date a closed transfer  Checking  Savings  Money market  Brokerage  Other  Other  Other  Other  Other  Other  Other	made  brage Units  our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension  out or  Date account was closed, sold, moved, or before closing	Boxes, and Storage L	nts, Instruments, Safe Deposit tcy, were any financial accounts or ins , or other financial accounts; certificat	st Certain Financial Accour year before you filed for bankrupt ed?	
List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  ithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your saferred?  Dute checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit nds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Last 4 digits of account number  Type of account or instrument  Checking  Savings  Money market  Brokerage  Other  Number Street  XXXX	our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension or Date account was closed, sold, moved, or before closing	truments held in your name	tcy, were any financial accounts or ins	st Certain Financial Accour year before you filed for bankrupt ed?	
thin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your name for red?  Itude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit nds, cooperatives, associations, and other financial institutions.    No	our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension or Date account was closed, sold, moved, or before closing	truments held in your name	tcy, were any financial accounts or ins	year before you filed for bankrupt ed?	3: List C
thin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your name for red?  Itude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit nds, cooperatives, associations, and other financial institutions.    No	our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension or Date account was closed, sold, moved, or before closing	truments held in your name	tcy, were any financial accounts or ins	year before you filed for bankrupt ed?	B: List C
thin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your name for red?  Itude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit nds, cooperatives, associations, and other financial institutions.    No	our name, or for your benefit, closed, sold, moved, or es in banks, credit unions, brokerage houses, pension or Date account was closed, sold, moved, or before closing	truments held in your name	tcy, were any financial accounts or ins	year before you filed for bankrupt ed?	B: List C
nsferred?	es in banks, credit unions, brokerage houses, pensions or Date account was closed, sold, moved, or Last balance before closing		, or other financial accounts; certificat	red?	
Name of Financial Institution  XXXX-	closed, sold, moved, or before closing			Fill in the details.	
Number Street    Checking     Savings     Money market     Brokerage     Other     City   State   ZIP Code    Name of Financial Institution     XXXX-			Last 4 digits of account number		
Money market   Brokerage   Other     Name of Financial Institution   Checking   Savings   Money market     Brokerage   Other     Other   City   State   ZIP Code     City   State   ZIP Code   City   State   ZIP Code     City   State   ZIP Code   City   State   ZIP Code     City   State   ZIP Code   City   Ci		☐ Checking		of Financial Institution	Name of Fir
Money market   Brokerage   Other     Other   City   State   ZIP Code     Name of Financial Institution   Checking   Savings     Money market   Brokerage   Other     Other   Other   Other     Other		Savings	_		
City State ZIP Code  Name of Financial Institution  XXXX	t	·		r Street	Number
Name of Financial Institution  Number Street  City State ZIP Code  XXXX		•	_		
Name of Financial Institution  XXXX Checking  Savings  Money market  Brokerage  Other  City State ZIP Code	<del></del>	Other			
XXXXChecking  Savings  Money market  Brokerage  Other  Other			_	State ZIP Code	City
Money market  Brokerage  Other  City State ZIP Code		Checking		of Financial Institution	Name of Fir
☐ Brokerage ☐ Other  City State ZIP Code		Savings	_		
City State ZIP Code	t.	· ·		r Street	Number
	<u></u>	☐ Other	_		
you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for se			_	State 7ID Code	City
	er depository for securities, cash, or other valuables?			State AIF COUR	-
Ino		e deposit box or other deposi	ar before you filed for bankruptcy, any sa		-

Debtor 1	Joel Case 17-40369 Doc	1 Filed 02/24/16 Tatal Entered 02/24/17 08:	55:08 Desc Main Document Page 43 of 5	<u>3</u> )
	First Name Middle			
		Who else had access to it?	Describe the contents	Do you still have
				it?
Name of	Financial Institution	Name	-	□ No □ Yes
				Tes es
Number	Street	Number Street	-	
		City State ZIP Code	-	
City	State ZIP Code	<del>-</del>		
✓No	stored property in a storage unit or p	place other than your home within 1 year befor	e you filed for bankruptcy?	
		Who else has or had access to it?	Describe the contents	Do you still have it?
				□No
Name of	Storage Facility	Name	-	Yes
Number	Street	Number Street	-	
		- City State ZIP Code	-	
		- State Zii Gode		
City	State ZIP Code			
Part 9: Ide	ntiry Property You Hold or	Control for Someone Else		
23. Do you hol	d or control any property that some	eone else owns? Include any property you bor	rowed from, are storing for, or hold in trust for some	one.
☐Yes. Fil	I in the details.			
		Where is the property?	Describe the property	Value
	Name -		_	
Owner's	name	Number Street		
Number	Street		-	
		_ City State ZIP Code	-	
City	State ZIP Code	-		
Part 10: Gi	ve Details About Environm	nental Information		
	e of Part 10, the following definition			
■ Environme	ental law means any federal, state, into the air, land, soil, surface wat	or local statute or regulation concerning pollu	tion, contamination, releases of hazardous or toxic statutes or regulations controlling the cleanup of th	
■ Site means		s defined under any environmental law, wheth	er you now own, operate, or utilize it or used to own	n, operate, or utilize it,
	s <i>material</i> means anything an envir nt, or similar term.	onmental law defines as a hazardous waste, h	nazardous substance, toxic substance, hazardous i	material, pollutant,
		you know about, regardless of when they occ	curred.	

vernmental unit vernmental unit mber Street State ZIP Code	Environmental law, if you know it	Date of notice
vernmental unit	Environmental law, if you know it	Date of notice
nber Street		
State ZIP Code		
ease of hazardous material?		
overnmental unit	Environmental law, if you know it	Date of notice
Tronincial and	Livilotinicital law, ii you kilow k	Date of House
vernmental unit		
mber Street		
State ZIP Code		
tive proceeding under any environmer	ntal law? Include settlements and orders.	
ourt or agency	Nature of the case	Status of the cas
urt Name		Pending
		☐On appeal☐Concluded
mber Street		Concluded
State ZIP Code		
	rernmental unit  Ternmental unit  Therefore  State ZIP Code  tive proceeding under any environmental unit or agency  Therefore agency  Therefore agency	State ZIP Code  State ZIP Code  tive proceeding under any environmental law? Include settlements and orders.  Pourt or agency  Nature of the case

Joel Case 17-40369 Doc 1 Filed 02/24/12 Tatal Findered 02/24/17 08:55:08 Desc Main Document Page 44 01 52

Debtor 1

<u>Joel</u> Case 17-40369 Doc 1 Filed 02/24/17 Catalantered 02/24/17 08:55:08 Desc Main Document Page 45 of 52 Debtor 1 Last Name

Middle Name

North Texas Stone Masons and	Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
Watergardens		Do not include occidi security number of frint.
Name		EIN:
1704 Falmouth		
Number Street	Name of accountant or bookkeeper	Dates business existed
	_	
		From To
Plano, TX 75025  City State ZIP Code	_	
ony out in cour	Describe the nature of the business	Employer Identification number
	— Describe the nature of the business	Do not include Social Security number or ITIN.
Name		,
		EIN:
Number Street	-	
	Name of accountant or bookkeeper	Dates business existed
	-	
		From To
City State ZIP Code	_	
	Describe the nature of the business	Employer Identification number
 Name	-	Do not include Social Security number or ITIN.
Name		EIN:
	_	
Number Street	Name of a constant and a classical	Dates business existed
	Name of accountant or bookkeeper	Dates business existed
		FromTo
	_	
City State ZIP Code		
	, did you give a financial statement to anyone about y	our business? Include all financial institutions, creditors, or other
rties.		
No		
INO		
Yes. Fill in the details below.		
	Date issued	
	Date issued	
Yes. Fill in the details below.		
	Date issued  MM / DD / YYYY	
Yes. Fill in the details below.		
Yes. Fill in the details below.		
Yes. Fill in the details below.		
Yes. Fill in the details below.		
Yes. Fill in the details below.		

	Case 17-//0360	Doc 1	Filed 02/24/27 talantered 02/24/17 08:55:08	Desc Main Document	number (if known)
Debtor 1	Joel Case 17-40309	DUC I	Filed 02/24/Cataland led 02/24/17 00.55.00	Desc Main Document	raye 40 01 32

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes. Name of person \_\_\_

## United States Bankruptcy Court Eastern District of Texas

In เ Ca	<b>re</b> italano, Joel			
Ou	italiano, ocon		Case No	
De	btor		Chapter	7
	DISCLOSURE	OF COMPENSATION OF ATT	ORNEY FOR DEBTOR	R
1.	named debtor(s) and that cor bankruptcy, or agreed to be pa	a) and Fed. Bankr. P. 2016(b), mpensation paid to me within o aid to me, for services rendere or in connection with the bankr	one year before the filed or to be rendered or	ing of the petition in behalf of the
	For legal services, I have agre	eed to accept		\$2,000.00
	Prior to the filing of this stater	ment I have received		\$2,000.00
	Balance Due			\$0.00
2.	The source of the compensatio	n to be paid to me was:		
	<b>☑</b> Debtor	Other (specify)		
3.	The source of compensation to	be paid to me is:		
	<b>☑</b> Debtor	Other (specify)		
4.	✓ I have not agreed to share tunless they are members and a		tion with any other pe	rson
	☐ I have agreed to share the a persons who are not members together with a list of the name	or associates of my law firm. A	copy of the agreemen	ıt,
5.	In return for the above-disclose of the bankruptcy case, includir		legal service for all as	pects
		nancial situation, and rendering file a petition in bankruptcy;	g advice to the debtor	
	<ul> <li>b. Preparation and filing of an which may be required;</li> </ul>	ny petition, schedules, stateme	ents of affairs and plar	1

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

## CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. O2/24/2017 Date /s/ Seth Crosland Signature of Attorney Brandy Austin Law Firm, PLLC Name of law firm

Case 17-40369 Doc 1 Filed 02/24/17 Entered 02/24/17 08:55:08 Desc Main Document Page 49 of 52 Fill in this information to identify your case: Check one box only as directed in this form and in Form 122A-1Supp: Debtor 1 Catalano ✓ 1. There is no presumption of abuse. First Name Middle Name Last Name Debtor 2 ■ 2. The calculation to determine if a presumption of (Spouse, if filing) First Name Middle Name Last Name abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). **Eastern District of Texas** United States Bankruptcy Court for the: 3. The Means Test does not apply now because of Case number qualified military service but it could apply later. (if known) ☐ Check if this is an amended filing Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Column A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all \$0.00 payroll deductions). \$0.00 Alimony and maintenance payments if Column B is filled in. Do not include payments from a All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you \$0.00 listed on line 3. Net income from operating a business, profession, or Debtor 1 Debtor 2 \$9 130 17 Gross receipts (before all deductions) \$8,521.07 Ordinary and necessary operating expenses \$609.10 Net monthly income from a business, profession, or farm Copy 6. Net income from rental and other real property Debtor 1 Debtor 2 \$0.00 Gross receipts (before all deductions) \$0.00 Ordinary and necessary operating expenses \$0.00 Copy Net monthly income from rental or other real property \$0.00 7. Interest, dividends, and royalties \$0.00 Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income page 1

Case 17-40369 Doc 1 Filed 02/24/17 Entered 02/24/17 08:55:08 Desc Main Document Page 50 of 52 Debtor 1 Catalano Middle Name First Name Last Name Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation \$0.00 Do not enter the amount if you contend that the amount received was a benefit under \$0.00 For you..... For your spouse..... \$0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. \$609.10 \$609.10 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. **Total current** monthly income Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: \$609.10 12a. Copy your total current monthly income from line 11..... Copy line 11 here → Multiply by 12 (the number of months in a year). x 12 12b. The result is your annual income for this part of the form. \$7,309.20 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. \$60,935.00 Fill in the median family income for your state and size of household...... To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. ☑Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Joel Catalano Signature of Debtor 1 Signature of Debtor 2 Date 02/24/2017 Date

If you checked line 14a, do NOT fill out or file Form 122A-2.

MM/DD/YYYY

If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM/DD/YYYY

## Case 17-40369 Doc 1 Filed INPITATES GANGES FOR Y DESCRIPTION DOCUMENT Page 51 of 52 EASTERN DISTRICT OF TEXAS SHERMAN DIVISION

IN RE: Catalano, Joel CASE NO
CHAPTER 7

## **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereb	y verifies that the attached list of creditors is true and	correct to the best of his/her knowledge.

Date 02/24/2017	Signature	/s/ Joel Catalano
	-	
Date	Signature	

AWA Collections AWA Collections 1045 W Katella Ave Orange, CA 92867

Caprock Hardscape, Ltd. 792 E. Main St. Lewisville, TX 75057

Chase Mtg PO Box 24696 Columbus, OH 43224

DFW Stone Supply - Prosper 401 East University Prosper, TX 75078

TXU/Texas Energy TXU/Bankruptcy PO Box 650393 Dallas, TX 75265-9627